

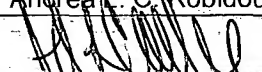
Please type a plus sign (+) inside this box 

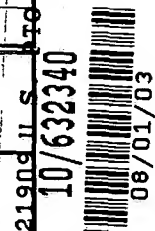
PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

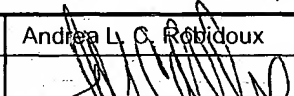
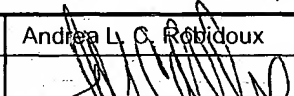
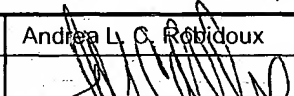
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. VPI/02-119 US	
		First Inventor Cornelia J. Forster	
		Title Compositions Useful as Inhibitors of GSK3	
		Express Mail Label No. EV 317 173 082	
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
<p>1. <input type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small></p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 58] <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]</p> <p>5. Oath or Declaration [Total Pages 3]<ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small><ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Form (CRF)b. Specification Sequence Listing on:<ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paperc. <input type="checkbox"/> Statements verifying identity of above copies</p> <p style="text-align: center;">ACCOMPANYING APPLICATIONS PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small></p> <p>17. <input checked="" type="checkbox"/> Other: Express Mail Cover Page</p>	
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____</p> <p>Prior application information: Examiner _____ Group / Art Unit: _____</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
19. CORRESPONDENCE ADDRESS			
<input type="checkbox"/> Customer Number or Bar Code Label		27916	
		or <input checked="" type="checkbox"/> Correspondence address below	
Name		Andrea L. C. Robidoux Vertex Pharmaceuticals Incorporated	
Address		130 Waverly Street	
City	Cambridge	State	Massachusetts
Country	USA	Zip Code	02139-4242
		Telephone	(617) 444-6731
		Fax	(617) 444-6483
Name (Print/Type)		Registration No. (Attorney/Agent)	
Andrea L. C. Robidoux		47,902	
Signature		Date	
		August 1, 2003	



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="margin: 0; font-size: small;">Patent fees are subject to annual revision.</p>				Complete if Known																																																																																																																																																																																																																																																																																																																																							
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				Application Number	Not Yet Assigned																																																																																																																																																																																																																																																																																																																																						
				Filing Date	Herewith																																																																																																																																																																																																																																																																																																																																						
				First Named Inventor	Cornelia J. Forster																																																																																																																																																																																																																																																																																																																																						
				Examiner Name	Not Yet Assigned																																																																																																																																																																																																																																																																																																																																						
				Group Art Unit	Not Yet Assigned																																																																																																																																																																																																																																																																																																																																						
TOTAL AMOUNT OF PAYMENT (\$) 1,120.00				Attorney Docket No.	VPI/02-119 US																																																																																																																																																																																																																																																																																																																																						
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																																																																							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-0725 Deposit Account Name: Vertex Pharmaceuticals				3. ADDITIONAL FEES																																																																																																																																																																																																																																																																																																																																							
The Commissioner is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				<table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="6">Other fee (specify) _____</td></tr> <tr> <td colspan="4" style="text-align: right;"> Subtotal (1) (\$) 750.00 </td> <td colspan="2" style="text-align: right;"> Subtotal (3) (\$) _____ </td> </tr> <tr> <td colspan="6" style="padding: 5px;"> 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE </td> </tr> <tr> <td colspan="6" style="padding: 5px;"> <table style="width: 100%; font-size: x-small;"> <tr> <td>Total Claims</td> <td>25</td> <td>-20** =</td> <td>5</td> <td>x</td> <td>18.00</td> <td>=</td> <td>90.00</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>-3** =</td> <td>0</td> <td>x</td> <td>84.00</td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td>280.00</td> <td>=</td> <td>280.00</td> </tr> </table> </td> </tr> <tr> <td colspan="6" style="padding: 5px;"> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"> Subtotal (2) (\$) 370.00 </td> <td colspan="2"></td> </tr> </tbody> </table> </td> </tr> <tr> <td colspan="6" style="padding: 5px;"> **or number previously paid, if greater; For Reissues, see above </td> </tr> <tr> <td colspan="6" style="padding: 5px;"> SUBMITTED BY </td> </tr> <tr> <td colspan="2" style="padding: 5px;">Name (Print/Type)</td> <td colspan="2" style="padding: 5px;">Andrea L. C. Robidoux</td> <td colspan="2" style="padding: 5px;">Registration No. (Attorney/Agent)</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Signature</td> <td colspan="2" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;">47,902</td> </tr> <tr> <td colspan="4" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;">Telephone</td> </tr> <tr> <td colspan="4" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;">(617) 444-6731</td> </tr> <tr> <td colspan="4" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;">Date</td> </tr> <tr> <td colspan="4" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;">August 1, 2003</td> </tr> </tbody> </table>		Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1051	130	2051	65	Surcharge - late filing fee or oath		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		1053	130	1053	130	Non-English specification		1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		1251	110	2251	55	Extension for reply within first month		1252	410	2252	205	Extension for reply within second month		1253	930	2253	465	Extension for reply within third month		1254	1,450	2254	725	Extension for reply within fourth month		1255	1,970	2255	985	Extension for reply within fifth month		1401	320	2401	160	Notice of Appeal		1402	320	2402	160	Filing a brief in support of an appeal		1403	280	2403	140	Request for oral hearing		1451	1,510	1451	1,510	Petition to institute a public use proceeding		1452	110	2452	55	Petition to revive - unavoidable		1453	1,300	2453	650	Petition to revive - unintentional		1501	1,300	2501	650	Utility issue fee (or reissue)		1502	470	2502	235	Design issue fee		1503	630	2503	315	Plant issue fee		1460	130	1460	130	Petitions to the Commissioner		1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		1806	180	1806	180	Submission of Information Disclosure Stmt		8021	40	8021	40	Recording each patent assignment per property (times number of properties)		1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))		1810	750	2810	375	For each additional invention to be examined (37CFR 1.129(b))		1801	750	2801	375	Request for Continued Examination (RCE)		1802	900	1802	900	Request for expedited examination of a design application		Other fee (specify) _____						Subtotal (1) (\$) 750.00				Subtotal (3) (\$) _____		2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE						<table style="width: 100%; font-size: x-small;"> <tr> <td>Total Claims</td> <td>25</td> <td>-20** =</td> <td>5</td> <td>x</td> <td>18.00</td> <td>=</td> <td>90.00</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>-3** =</td> <td>0</td> <td>x</td> <td>84.00</td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td>280.00</td> <td>=</td> <td>280.00</td> </tr> </table>						Total Claims	25	-20** =	5	x	18.00	=	90.00	Independent Claims	2	-3** =	0	x	84.00	=	0.00	Multiple Dependent					280.00	=	280.00	<table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"> Subtotal (2) (\$) 370.00 </td> <td colspan="2"></td> </tr> </tbody> </table>						Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	84	2201	42	Independent claims in excess of 3		1203	280	2203	140	Multiple dependent claim, if not paid		1204	84	2204	42	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		Subtotal (2) (\$) 370.00						**or number previously paid, if greater; For Reissues, see above						SUBMITTED BY						Name (Print/Type)		Andrea L. C. Robidoux		Registration No. (Attorney/Agent)		Signature				47,902						Telephone						(617) 444-6731						Date						August 1, 2003	
Large Entity		Small Entity		Fee Description	Fee Paid																																																																																																																																																																																																																																																																																																																																						
Fee Code	Fee (\$)	Fee Code	Fee (\$)																																																																																																																																																																																																																																																																																																																																								
1051	130	2051	65	Surcharge - late filing fee or oath																																																																																																																																																																																																																																																																																																																																							
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet																																																																																																																																																																																																																																																																																																																																							
1053	130	1053	130	Non-English specification																																																																																																																																																																																																																																																																																																																																							
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination																																																																																																																																																																																																																																																																																																																																							
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action																																																																																																																																																																																																																																																																																																																																							
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action																																																																																																																																																																																																																																																																																																																																							
1251	110	2251	55	Extension for reply within first month																																																																																																																																																																																																																																																																																																																																							
1252	410	2252	205	Extension for reply within second month																																																																																																																																																																																																																																																																																																																																							
1253	930	2253	465	Extension for reply within third month																																																																																																																																																																																																																																																																																																																																							
1254	1,450	2254	725	Extension for reply within fourth month																																																																																																																																																																																																																																																																																																																																							
1255	1,970	2255	985	Extension for reply within fifth month																																																																																																																																																																																																																																																																																																																																							
1401	320	2401	160	Notice of Appeal																																																																																																																																																																																																																																																																																																																																							
1402	320	2402	160	Filing a brief in support of an appeal																																																																																																																																																																																																																																																																																																																																							
1403	280	2403	140	Request for oral hearing																																																																																																																																																																																																																																																																																																																																							
1451	1,510	1451	1,510	Petition to institute a public use proceeding																																																																																																																																																																																																																																																																																																																																							
1452	110	2452	55	Petition to revive - unavoidable																																																																																																																																																																																																																																																																																																																																							
1453	1,300	2453	650	Petition to revive - unintentional																																																																																																																																																																																																																																																																																																																																							
1501	1,300	2501	650	Utility issue fee (or reissue)																																																																																																																																																																																																																																																																																																																																							
1502	470	2502	235	Design issue fee																																																																																																																																																																																																																																																																																																																																							
1503	630	2503	315	Plant issue fee																																																																																																																																																																																																																																																																																																																																							
1460	130	1460	130	Petitions to the Commissioner																																																																																																																																																																																																																																																																																																																																							
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)																																																																																																																																																																																																																																																																																																																																							
1806	180	1806	180	Submission of Information Disclosure Stmt																																																																																																																																																																																																																																																																																																																																							
8021	40	8021	40	Recording each patent assignment per property (times number of properties)																																																																																																																																																																																																																																																																																																																																							
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																																																																																																																																																																																																																																																																							
1810	750	2810	375	For each additional invention to be examined (37CFR 1.129(b))																																																																																																																																																																																																																																																																																																																																							
1801	750	2801	375	Request for Continued Examination (RCE)																																																																																																																																																																																																																																																																																																																																							
1802	900	1802	900	Request for expedited examination of a design application																																																																																																																																																																																																																																																																																																																																							
Other fee (specify) _____																																																																																																																																																																																																																																																																																																																																											
Subtotal (1) (\$) 750.00				Subtotal (3) (\$) _____																																																																																																																																																																																																																																																																																																																																							
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																																																																																																																																																																																																																																																																																																																											
<table style="width: 100%; font-size: x-small;"> <tr> <td>Total Claims</td> <td>25</td> <td>-20** =</td> <td>5</td> <td>x</td> <td>18.00</td> <td>=</td> <td>90.00</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>-3** =</td> <td>0</td> <td>x</td> <td>84.00</td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td>280.00</td> <td>=</td> <td>280.00</td> </tr> </table>						Total Claims	25	-20** =	5	x	18.00	=	90.00	Independent Claims	2	-3** =	0	x	84.00	=	0.00	Multiple Dependent					280.00	=	280.00																																																																																																																																																																																																																																																																																																														
Total Claims	25	-20** =	5	x	18.00	=	90.00																																																																																																																																																																																																																																																																																																																																				
Independent Claims	2	-3** =	0	x	84.00	=	0.00																																																																																																																																																																																																																																																																																																																																				
Multiple Dependent					280.00	=	280.00																																																																																																																																																																																																																																																																																																																																				
<table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"> Subtotal (2) (\$) 370.00 </td> <td colspan="2"></td> </tr> </tbody> </table>						Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	84	2201	42	Independent claims in excess of 3		1203	280	2203	140	Multiple dependent claim, if not paid		1204	84	2204	42	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		Subtotal (2) (\$) 370.00																																																																																																																																																																																																																																																																																													
Large Entity		Small Entity		Fee Description	Fee Paid																																																																																																																																																																																																																																																																																																																																						
Fee Code	Fee (\$)	Fee Code	Fee (\$)																																																																																																																																																																																																																																																																																																																																								
1202	18	2202	9	Claims in excess of 20																																																																																																																																																																																																																																																																																																																																							
1201	84	2201	42	Independent claims in excess of 3																																																																																																																																																																																																																																																																																																																																							
1203	280	2203	140	Multiple dependent claim, if not paid																																																																																																																																																																																																																																																																																																																																							
1204	84	2204	42	** Reissue independent claims over original patent																																																																																																																																																																																																																																																																																																																																							
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																																																																																																																																																							
Subtotal (2) (\$) 370.00																																																																																																																																																																																																																																																																																																																																											
**or number previously paid, if greater; For Reissues, see above																																																																																																																																																																																																																																																																																																																																											
SUBMITTED BY																																																																																																																																																																																																																																																																																																																																											
Name (Print/Type)		Andrea L. C. Robidoux		Registration No. (Attorney/Agent)																																																																																																																																																																																																																																																																																																																																							
Signature				47,902																																																																																																																																																																																																																																																																																																																																							
				Telephone																																																																																																																																																																																																																																																																																																																																							
				(617) 444-6731																																																																																																																																																																																																																																																																																																																																							
				Date																																																																																																																																																																																																																																																																																																																																							
				August 1, 2003																																																																																																																																																																																																																																																																																																																																							

Attorney Docket No.: VPI/02-119 US

Certificate Of Mailing Under 37 C.F.R. § 1.10

Express Mailing No. EV 317 173 082 US

Date of Deposit: August 1, 2003

I hereby certify that the following documents:

1. Utility Transmittal for Patent Application;
2. Specification 58 pages (Desc. 51 pgs, Claims 6 pgs., Abstract 1 pg);
3. Executed Declaration/Power of Attorney Document (3 pages);
4. 2 Sheets Figures (Figure 1 and Figure 2); and
5. Return Postcard Receipt.

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to the MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

KAREN DiROCCO

(type or printed name of person mailing document(s))

Karen DiRocco

(signature of person mailing document(s))